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## APPLICANTS

James H. Sabo, Santa Maria, CA;

\*\* CONTINUING DATA \*\*\*\*\*

None - gfb

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

None - gfb

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
\*\* 08/13/2004

\*\* SMALL ENTITY \*\*

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 1	TOTAL CLAIMS 4	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: _____				

## ADDRESS

39795  
 LAURA N. TUNNELL  
 P.O. BOX 91929  
 SANTA BARBARA , CA  
 93190

## TITLE

Intertoe towel

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